MCO GENERATED PROBLEM REPORTS

TRAN	Prob Rpt #	IDENTIFIED BY	PROBLEM DESCRIPTION	RESOLUTION	DATE Resolved

Open Problem Reports:

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837	837075	MCP	Looks like this is a case of the plans validator doing all 7 levels vs. AHCCCS's 4, in this case AHCCCS will not necessarily agree on the edits that are appearing, also when you 'dummy' down the 997, it gets very hard to figure out what the 'errors' are which is why they sent us the text descriptions from the 824 to compare. We are getting a large volume of error messages from Mercy Care. Our translator is set up to check for Duplicate Control numbers. Mercy Care needs to be contacted to send unique Control numbers for each ISA-IEA for any transaction.		
837	837075	HCA	Submission of 'FA' in the GS01 field. AHCCCS expected 'BE'	Referred Ethan to the IG specific to the 997 transaction, via web address (email dated 08/06/03)	
837	837075	PIMA	Version Release number is incorrect. They submitted 004010. AHCCCS is expecting the full release number/information.	Referred Mark to the HIPAA IG specific to the 834 transaction, Appendix B, Oct. 2002 Addenda.	
834	834235	University Physicians	This issue is for University Physicians, Tucson, AZ. Receiver ID UPI010314 Some Add transactions in the current manual report are not included in the daily EDI 834 files. We expected all of the transactions that currently appear on the reports to appear on the EDI 834 daily files. Two examples from the 8/15/03 report are: AHCCCS ID A49740446 Corina Ruiz A29300147 Raul Huerta Each of these members have three enrollment transactions on the paper report. They aren't included in any of the following EDI 834 daily files:	Do not know of what manual or paper report they are referring to. Since they are speaking of only 3 transactions they must be referring to the Manual Payment roster of which, those transactions do not appear on the 834 - only on the 820's. Manual payments rosters are only payments and not enrollments.	

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			030807.DLR;1　　　124　18-AUG-2003 14:55:49.12 030808.DLR;1　　　127　18-AUG-2003 14:55:50.95 030809.DLR;1　　　127　18-AUG-2003 14:55:53.13 030810.DLR;1　　　　6　18-AUG-2003 14:55:55.13 030811.DLR;1　　　　1　18-AUG-2003 14:55:55.77 030812.DLR;1　　　154　18-AUG-2003 14:55:56.39 030813.DLR;1　　　148　18-AUG-2003 14:55:58.79 030814.DLR;1　　　116　18-AUG-2003 14:56:51.34 030815.DLR;1　　　119　20-AUG-2003 07:14:27.24 030816.DLR;1　　　117　20-AUG-2003 07:14:29.21 030817.DLR;1　　　　9　20-AUG-2003 07:14:31.18 030818.DLR;1　　　　56　20-AUG-2003 07:14:31.80 09/5/03 BD: I received a call from the AHCCCS programmer on 08/26/03, and explained that we are comparing the daily eligibility roster to the daily EDI 834 test file. We expect every transaction on the daily roster to appear on daily EDI 834 file. This problem report contains a list of three examples of transactions that appear on the daily roster but do not appear on the EDI 834 file for the same day. Please call (415) 618-0287 or email bduncan@global-works.com if you need clarification.		

Resolved Problem Reports:

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820	820027	ADHS/BHS	See Claredi report - Attached. Numerous issues.	New test file sent to BHS 6/5/03. 08/07/03 CJ Major: Format is now ok, but we did not get a complete file. We only got our summary segments for the Title XIX population, not Title XXI or HIFA. We are also only getting one file a month. We still need to pass a couple of *complete* tests before we think about production. Altered 820 code in Oracle to correctly account for BHS pmts. Tested OK.	09/03/03

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820	820042	APIPA	These are the test results for the most recent 820 and 834 test transactions
			that were on the VPN.
			
			820:
			Message Summary Code Count Message
			                                    W21050 9410 May not contain 'ZZ' until the HIPAA Individual
			                                                       Identifier is available.
			                                    B42004 1 Code value 'I' at BPR01 can only be used when
			                                                       Payment Method Code (BPR04)
			is Check (CWK), Federal Reserve Funds/Wire Transfer (FWT), or Society for Worldwide
			 Interbank Financial Telecommunications (SWT)
			W10009 1 Warning! padding, spaces or control characters after segment terminators
			will be ignored
			
			(See attached file: AHCCCS_820_TEST_030626.zip)
				No unknown issues were noted. All errors have been resolved by Claredi.	08/13/03

834	834145	APIPA	We pulled our monthly roster, ran it through claredi and below are the summary of errors. For the most part I think the errors are really tide to the quality of data that may be in the data field than a program bug itself. I would however take note of the data values and perhaps place a patch in the translation programs to address these possible errors. Bottom line the 834 file looks nice. H10016 163 Leading spaces are not allowed in 'Member Residence Street Address - Address Information'. The X12 syntax requires the	Put patches in map to fix data problems by trimming spaces. Spec update not needed.	07/26/03

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			suppression of leading and trailing spaces. H51123 4 This Zip Code is not currently used by the US Postal Service. H20628 3 The value '855206716' at 'NM109' doesn't appear to be a valid 'Social Security Number Format'.		

834	834121	APIPA	These are the test results for the most recent 820 and 834 test transactions that were on the VPN.
			
			820:
			Message Summary Code Count Message
			                              W21050 9410 May not contain 'ZZ' until the HIPAA Individual
			                                                Identifier
			is available.
			                              B42004 1 Code value 'I' at BPR01 can only be used when
			                                                Payment
			Method Code (BPR04)
			is Check (CWK), Federal Reserve Funds/Wire Transfer (FWT), or Society for Worldwide
			 Interbank Financial Telecommunications (SWT)
			W10009 1 Warning! padding, spaces or control characters after segment terminators
			will be ignored
			
			(See attached file: AHCCCS_820_TEST_030626.zip)
				No unknown issues noted, errors have been resolved by Claredi.	08/13/03

834	834108	APIPA	Claredi Testing errors.	Claredi has fixed the edits, and we are now in the process of certifying files.	08/11/03
834	834217	CONSORTIUM MEMBERS	Will initiate a problem report to make this change. Take everything down to the 2300 level and make it health coverage. Add is a 021, insurance one code would be an AG. AG is Preventative care wellness. Plan coverage description of PG and effective date as the	Mapping was completed according to attached documentation.	09/02/03

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			date the file was processed.		
OTH	OTH004	CONSORTIUM MEMBERS	COB03 should have been a '5' for Unknown. Pg. 12; 10; 13.	Addressed in another ticket. Duplicate.	08/14/03
820	820064	CRS	Need a problem ticket for item 3 below - translator specs say N/A on NM108 in the 2100B loop, and the map matches the specs. Confirmed with MaryKay; it must be "N"; NM108 is a qualifier that precedes the data in NM109. Mercator compliance checker didn't catch it, but then might not have anyway. This is from the corrected CRS file I sent them Thursday morning after our discussion with them at the consortium meeting Wednesday (so the file was created on my box, and didn't go through Commerce Manager, which should have caught it). Items 1 and 2 can be explained by the fact that the file was created on my box, and I use a generic Partner Info file, not the data that would normally come from Partner Manager. Item 4 is a data issue; the file I got to translate did not have the data to be moved across. It comes from the Recipient system, and is the CRS Client Id. Deb Hays and Shirley Schwartz are currently looking into the mainframe process to determine if the data is simply not on our Recipient files, or possibly being pulled incorrectly. I'll let you know if we find a problem there. Matt -----Original Message----- From: Tom Browning [mailto:tbrowni@hs.state.az.us] Sent: Friday, August 15, 2003 10:54 AM To: MCFurze@ahcccs.state.az.us; Brian Heise Cc: DCKoch@ahcccs.state.az.us; LAPetre@ahcccs.state.az.us; Dimiter Pekin; Dennis Seidel; Jeannette Heller; Leland Cisney; Ric Surber	Map corrected - Ready to Deploy	08/19/03

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			Subject: Re: Corrected 820 file
			
			Matthew,
			
			   There are a few problems with the initial 820 test file.
			
			   1) The receiver identification information in the ISA and GS segments do not match the documentation from AHCCCS for identifying CRS as the recipient. I modified these to allow the file to be tested in CRS translators.
			
			   2) The Loop 1000A Premium Receiver's Name segment N1 contains the name 'DES BHS' in N102. I modified it to allow the file to be tested in CRS translators.
			
			   3) The file cannot be translated due to missing data in Loop 2100B element NM108. NM108 should always be "N", "Insured's Unique Identification Number", to identify NM109 as the Client ID number.
			
			   4) The first ENT loop does not have any data in the NM108 or NM109 elements. There should never be blanks in Loop 2100B NM108 or NM109, because it a CRS member must have CRS ID. This is a data issue, but I am not sure how to resolve the amount to our database if I cannot identify the CRS member. We may need to discuss this separately.
			
			Tom Browning		

834	834177	CRS	CRS wants to use '1' - coordination of benefits in COB03 instead of '5' unknown.	Changed to autoplug '1' from autoplug '5' in COB03.	07/17/03
834	834129	CRS	CRS: The following changes need to be made to the spec and map. 1. In the 2000 loop, segment Member Policy Number, element REF02 please add Voucher ID concatenated at the	Change the map per description of problem.	07/09/03

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			end. This element will now have HP-ID+CHANGE-IND+CURR-ELIG-TYPE+CURR-RISK+VOUCHER-ID 2.In the 2320 loop, element COB03 please change the autoplug "U" to autoplug "5".		
820	820030	DHS/BHS	The specs for the 820 and the 834 only read: "Assign Unique Identification Number" Ted, who did the 271, and my guess because he is the most familiar with EDI - picked up that it was going to be a numeric field in a text definition and defined the element more along the lines of a numeric.... the field itself is a 4/9... meaning that the minimum length is 4 and the maximum length is 9....so you would expect 0001 rather than 1...... It has come to my attention that there is more than one method that is being used at AHCCCS to create the Transaction Set Control Number (Element ST02 and SE02) for the different transactions. The TS Control Number is identified as an alphanumeric field with a minimum length of 4 and a max length of 9. From the discussion in the 834 IG for the ST and the 820 IG for the SE, the example is to start with 0001 and increment from there. It appears that whomever coded the 834 and 820 decided to left justify and right *space* fill this field. Thus the first sequence number shows as 1 followed by 3 spaces, instead of the suggested and more often used 0001. The person working on your 270/271 is using the 0001 method, which seems, at least to us, the more acceptable method. Our translator (like Claredi) will process a file using the left justify/right space fill method, however we will not be	Database team refreshed the payment database over the weekend. We re-ran jobs on 6/23/03. All 820 files to MQD Server on 6/24/03.	06/26/03

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			able to create a valid 997 due to the fact that trailing spaces are trimmed from the element during processing. Please let me know if you are going to have a common scheme for ST/SE control numbers, and I would hope that you would use the method of starting at 0001 and incrementing from there.		
834	834109	DHS/BHS	The specs for the 820 and the 834 only read: "Assign Unique Identification Number" Ted, who did the 271, and my guess because he is the most familiar with EDI - picked up that it was going to be a numeric field in a text definition and defined the element more along the lines of a numeric.... the field itself is a 4/9... meaning that the minimum length is 4 and the maximum length is 9....so you would expect 0001 rather than 1...... It has come to my attention that there is more than one method that is being used at AHCCCS to create the Transaction Set Control Number (Element ST02 and SE02) for the different transactions. The TS Control Number is identified as an alphanumeric field with a minimum length of 4 and a max length of 9. From the discussion in the 834 IG for the ST and the 820 IG for the SE, the example is to start with 0001 and increment from there. It appears that whomever coded the 834 and 820 decided to left justify and right *space* fill this field. Thus the first sequence number shows as 1 followed by 3 spaces, instead of the suggested and more often used 0001. The person working on your 270/271 is using the 0001 method, which seems, at least to us, the more acceptable method.	Maps have been updated to process the ST Control Number as requested.	06/11/03

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			Our translator (like Claredi) will process a file using the left justify/right space fill method, however we will not be able to create a valid 997 due to the fact that trailing spaces are trimmed from the element during processing. Please let me know if you are going to have a common scheme for ST/SE control numbers, and I would hope that you would use the method of starting at 0001 and incrementing from there.		
834	834197	Global Works System	In the EDI 834 daily update file, the DMG segment is missing for change transactions. For Add (021) and Term (024) transactions, the DMG segment is present. But, the DMG segment is missing for Change (021) transactions. We use the Date of Birth and Gender fields in the DMG segment for member matching, so we are unable to process the change transactions without the DMG segment	This is a TPL only record. No change record exists. These examples exist only on the file 030609.DLR. They do not exist on 030608.DLR	08/05/03
820	820033	MARICOPA	This one appears to be something other than an 820 file from us. The same appears to be true for one of the other attachments to the prior 834 email. Can you verify these. I will create a problem ticket for the error log that does appear to be related to our 834 file and get it to the programmer ASAP.	There were no "H" type errors found within the attached file.	06/18/03
834	834113	MARICOPA	Our vendor, OAO Health Systems, took one of the latest 834 sample files and ran it through their CLAREDI checker. They came up with several errors. This surprises me in that I thought the State data would already have passed CLAREDI, although maybe I'm missing something here. At any rate, could someone contact me so we can discuss these discrepancies?	These Claredi issues have been defined on ticket 834108. As soon as we get answers back from Claredi ticket 834108 we will close.	07/25/03
834	834086	MERCY CARE	1. Health coverage (2300, HD) is required when BGN08 = 2 Test file = 030527.A.DLR 2. HD01 value '001' should not have DTP01 = 349 Note 349 value only if HD01 = '024' See Grey note on DTP01, value 349	1. Health coverage (230 HD) is not required on Disenrolls. 2. It is in the spec to move the end date if it is present. The IG say that this date should be used when Hd01=024. We are not using the 2300 loop for disenrolls. 3. This is the pregnancy diagnosis I have	07/30/03

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			3. Diagnosis code V22 was not found in code table V22 is not a valid diag. Code
			
			THIS TICKET WILL BE USED TO CORRECT THE ISSUE FOR BOTH AZ AND HI PER THE ATTACHED SPECIFICATIONS:
			For Arizona:
			   place "PG" in the 2000 REF02 - Member Policy number for Adds and PG
			   changes.
			
			   For Hawaii:
			   Place "PG" in the 2000 REF02 - Member Policy number for Adds and PG
			   changes - behind the action code...
			   It would appear as:
			   REF*IL*RATEACPG (rate code (4), action code (2) and PG indicator (2).
			
			   for the PG action code this would be
			   REF*IL*RATEPGPG
				never gotten a resolution on.
				The Map and Spec have been updated for AZ and HI. Member Policy 2000 REF02.
				AZ. - Adds and RateCDCHG - If preg-Ind present autoplug 'PG' else autoplug 'No Data'.
				AZ. - Preg Chg - autoplug 'PG'
				HI - Add, PregChg, OtherChg, RateCodeChg - If preg-Ind 'Y' move Cap-RateCd + ActionCD + 'PG' wlse move cap-rate-cd + action-CD.
				The pregnancy change has been implemented as a 2300 loop. This was agreed upon at the Consortium meeting by the Health Plans 07/16/03. See the last attachments.	

834	834085	MERCY CARE	Segment 7 (ISA - segment 1) or Segment 5 (ST - segment 1) contains the following values: N1{IN{Mercy Care Plan{FI{Mer010306~ The IG states if N103=FI, then N104 must equal fed tax Id number. MER010306 is an invalid fed tax Id number. Validation of the 03058.A.DLR file yields the following errors (1) Payer Name Id (1000B, N104) must be 9 numeric characters when N103=F1. Segment 7 (ISA=segment 1) or Segment 5 (ST=segment 1) contains the following values N1{IN{Mercy Care Plan{FI{Mer010306~	This test file was using an inaccurate table when running on 05/08/03. The Tax Id now comes from the Partner Manager database in Mercator, which now contains the correct Tax Id's. This was fixed by a previous problem ticket. The IG says NM104 is alphanumeric. No change made to map.	05/29/03
834	834084	MERCY CARE	The code value 030 in (Loop 2300 HD01) must not be used because the Action Code identified in (BGN08) was not equal to 4.	This problem was fixed by a previous problem report. Use new specs. Retest attached. No changes made to maps.	05/30/03
834	834202	Mercy Care/	There are two files (edi*.mer) that appear on the ftp site,	User is trying to load edi.mer files,	08/05/03

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		Schaller Anderson	but I am unable to download. Error message is file not found.	which have not finished the renaming process on the server. They should wait until the checklist is sent to confirm that all processes have been completed. If file name shows as: edinnnnnnnnnnnaaannnnnaa.mer[space]|[space]date[space]time[space]file size then this file has not yet finished processing. Once it has it will be renamed with correct file naming conventions.	
834	834249	PIMA	Mark, the following is from test file 030807.A.DLR. It is a sample of Action Codes EC and AA in the HD segment not being consistent. According to the Companion Document, the action code should start at the 36th position of the HD segment when passing an "HMO" loop. [Forbes, Thomas] Lori, I need a problem ticket for this to right fill with spaces the prior health plan name when it does not use all 25 bytes.	Map was fixed to space fill to correct length. No spec update needed.	09/02/03
820	820035	PIMA	We still are not getting data that mirrors production for the 820. The following plans are missing: 010124 (Ambulatory) and 550013 (ALTCS VENTS).	All files located and spreadsheet provided.	06/20/03
834	834186	PIMA	Mary, an example of a member changing plans, Acute medical 010124 to ALTCS and staying with Pima Health System. We see the 22 (Plan change) and their enrollment segment ends. In the second file that member comes in as an initial enrollment. This will cause an exception in our system since this really is not an initial enrollment. Also if we were to process file B before A, we would error out. We suggest that the action be changed to a 22 instead of a 28. We can right logic that will then be able to the plan change regardless to what order the files are processed.	Unfortunately, this is an issue that exists today. There is nothing in PMMIS that links two health plans together. The system sees LTC and Acute as two totally separate health plans and treats the transactions accordingly. HIPAA doesn't make it any better or worse, just in a different package. The fix is not in the scope of this project.	07/29/03
834	834144	PIMA	Found some inconsistencies regarding dates in the 834.	Retest attached. Retested successfully. I don't have an explanation except that	07/11/03

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				maybe the map needed to be redeployed. It works fine on my machine.	
834	834123	PIMA	Which time format is AHCCCS going to follow, HHMM or HHMMSS or HHMMSSDD? Here were the errors that the validator reported: the companion doc says that the time format should be HHMM error for 030627.A.dlr: File C:\Temp\dailyrosters\030627.A.DLR: Interchange Control Number | 000000212 File C:\Temp\dailyrosters\030627.A.DLR: Content: Warn | E| 2| GS_05_337 | invalid time format File C:\Temp\dailyrosters\030627.A.DLR: Group Control Number |2120001 File C:\Temp\dailyrosters\030627.A.DLR: Transaction Set Control Number | 0001 File C:\Temp\dailyrosters\030627.A.DLR: Content: Warn | E | 2 | BGN_04_337 | invalid time format There were a total of 2 warnings, 0 errors, and 0 fatal errors	The time format in the X12 type tree was overridden in the rule to format the time to HHMM. The spec and Companion guide needs no changes.	07/09/03
834	834122	PIMA	Inconsistent format for Facility ID: These are from file 030626.B.DLR: Although I could not find any mention of this in the companion document. I found that HD04 contains the Facility ID concatenated with the Facility Name when HD03 is 'FAC'. The problem is that sometimes the Facility Id is 6 characters and other times its 7 characters.	This was fixed in a previous problem ticket in which the spec was also updated. The problem was that when the LTC Trans Code was not present, the facility ID and Name were shifted over left 1 space. The Map and Spec were updated to place an 'N' in the 1st position when LTC Trans Code is not present.	07/09/03
834	834110	PIMA	2. Segment HD. Element HD04. When HD02 is 'FAC', HD04 should contain the Facility ID. I've hi-lited a few HD segments whose Facility ID does not look correct. Email from Mark Hart….	Changed HD04 to correctly partition the data. Spec change needed. We also need to notify the Health Plans that there is a space in LTC Transaction we will plug.	06/11/03
834	834105	PIMA	We are getting the following errors on the test files your are now submitting	This appears to be a problem with PIMA's mapping tool, not with our	06/11/03

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				maps.	
			File C:\DataJunction7.5\Validate\030604.B.DLR: Interchange Control Number | 000000147		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Group Control Number | 1470001		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Transaction Set Control Number | 0001		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Requirement: Error | L | 7 | [L.2000]L.2100A | Mandatory loop missing		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Requirement: Error | S | 0 | SE | Mandatory segment missing		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Requirement: Error | S | 0 | GE | Mandatory segment missing		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Requirement: Error | S | 0 | IEA | Mandatory segment missing		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Parsing stopped due to a unknown segment: REF was found in file:		
			File C:\DataJunction7.5\Validate\030604.B.DLR: Parsing: Fatal Error | Parsing stopped at SegRecName=[L.2000]REF_A, SegID=REF, Filepos=342		
			There were a total of 0 warnings, 4 errors, and 1 fatal errors		
834	834090	PIMA	The production data in the file named 030528.A.DLR matches the data in the test file named 030529.A.DLR. It	The Production cycle starts the day before we run the UAT. The Mercator	06/03/03

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			seems that when you are processing the 28th's data for the test, you are out of synch by a day for creating the process date in the file and the filename of the file.	files are set to process date. The UAT for the 820 and 834 is run the morning after production runs.	
834	834089	PIMA	The HD04 segment that will contain the ratecode and action code does not have a sub element delimiter to separate them. For example AHCCCS sent: HD{021{{HMO{3618EC~ This should have been: HD{021{{HMO{3618|EC~	Can't. HD04 is not a composite data element. See Attached.	06/04/03
834	834146	VERIZON	I thought you ought to know that you are using the Language Code Qualifier "LE" which indicates the ISO Code list.... however LUI02 contains three character codes. The NISO Code list is three character codes! ISO uses two character codes ... see the attached. Both are acceptable under HIPAA ... only code list that has two standards.	See attached - used ISO-639-2 No change needed.	07/11/03
834	834128	VERIZON	We have just delivered the Addenda changes to APIPA, this week. We have tried to process AHCCCS 820s and 834s Through Mercator and into our QA system. We are having a problem with the Daily 834s This is the message that appears throughout the (EDIFECS) HIPAADesk error reports for every 834 file we try to process It seems that for every INS segment with the INS-03 value = to 001 or 021, there must be an HD segment present. |--| |Segment HD is missing in the loop 2000. It's required when enrolling a new| |member or when adding, updating or removing coverage from an existing |	After carefully reviewing our specs and the implementation guide, it appears that we are mapping the 834 correctly. When the INS03 element contains '001' or '021' the HD or 2300 loop must be present only if there is a change to the coverage or when adding new coverage or when terminating a coverage. In the file of theirs that I looked at, it appears that the error is happening on address changes mainly. These are demographic changes and have no change to the coverage with them. We do not get the errors that they get when we pass our file through CLAREDI. My suggestion is that they look at the editing(certification) system that they are using.	07/08/03

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			|member (INS03='001' or '021'). | | | |This segment was expected after: Segment Count: 341, 434, 445, 593, | |613............ | |--| We have not tried the Monthly since we cannot get the Daily (smaller) files to work. We have processed 820s successfully in a test.		
834	834096	VERIZON	Trying to access the APIPA test 834 and 820 files Per Companion Guide, looking for: FTP\010158\HealthPlan\Rosters\OUT\TEST\ Do not find folders with these names. Only find current FTP\API\HLP\Rosters\Test What am I missing? We know the monthly files aren't ready, but thought we'd download the dailys.	The companion guide needs to be updated to reflect the following: FTP\API\HLP\Roster\Test This is the correct file path. The path in the companion guide has never existed. It is to my understanding that we were not changing the file names or file paths. Monthly's are in these folders also. This info. Is being removed from the companion guides, per John. 6/5/03	06/05/03